

County: Brown

Facility ID: 3840

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GRAN CARE NURSING CENTER

1555 DOUSMAN STREET

GREEN BAY 54303 Phone: (920) 494-4525

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 75

Total Licensed Bed Capacity (12/31/03): 75

Number of Residents on 12/31/03: 68

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 71

Corporation

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.5	
Supp. Home Care-Personal Care	No					1 - 4 Years		39.7	
Supp. Home Care-Household Services	No	Developmental Disabilities	1.5	Under 65	0.0	More Than 4 Years		14.7	
Day Services	No	Mental Illness (Org./Psy)	16.2	65 - 74	1.5			----	
Respite Care	No	Mental Illness (Other)	4.4	75 - 84	30.9			77.9	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	54.4	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	4.4	95 & Over	13.2	Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	8.8		100.0	(12/31/03)			
Other Meals	No	Cardiovascular	29.4	65 & Over	100.0	-----			
Transportation	No	Cerebrovascular	10.3		-----	RNs		13.2	
Referral Service	No	Diabetes	7.4	Gender	%	LPNs		9.3	
Other Services	Yes	Respiratory	4.4		-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	13.2	Male	14.7	Aides, & Orderlies			
Mentally Ill	No		----	Female	85.3				
Provide Day Programming for			100.0		----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care							
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Skilled Care	8	100.0	311	27	100.0	116	0	0.0	0	32	100.0	154	0	0.0	0	1	100.0	230	68	100.0	
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	8	100.0		27	100.0		0	0.0		32	100.0		0	0.0		1	100.0		68	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	5.2	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	100.0	0.0	68
Other Nursing Homes	2.6	Dressing	11.8	76.5	11.8	68
Acute Care Hospitals	91.0	Transferring	11.8	76.5	11.8	68
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	11.8	76.5	11.8	68
Rehabilitation Hospitals	0.0	Eating	88.2	4.4	7.4	68
Other Locations	1.1	*****				
Total Number of Admissions	267	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	4.4		Receiving Respiratory Care	5.9
Private Home/No Home Health	48.5	Occ/Freq. Incontinent of Bladder	17.6		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	10.3	Occ/Freq. Incontinent of Bowel	7.4		Receiving Suctioning	0.0
Other Nursing Homes	1.1				Receiving Ostomy Care	0.0
Acute Care Hospitals	22.5	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	19.1
Rehabilitation Hospitals	0.0					
Other Locations	17.6	Skin Care			Other Resident Characteristics	
Deaths	0.0	With Pressure Sores	4.4		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	1.5		Medications	
(Including Deaths)	262				Receiving Psychoactive Drugs	52.9

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.7	86.2	1.10	87.1	1.09	88.1	1.07	87.4	1.08
Current Residents from In-County	97.1	78.5	1.24	81.0	1.20	82.1	1.18	76.7	1.26
Admissions from In-County, Still Residing	10.9	17.5	0.62	19.8	0.55	20.1	0.54	19.6	0.55
Admissions/Average Daily Census	376.1	195.4	1.92	158.0	2.38	155.7	2.41	141.3	2.66
Discharges/Average Daily Census	369.0	193.0	1.91	157.4	2.34	155.1	2.38	142.5	2.59
Discharges To Private Residence/Average Daily Census	216.9	87.0	2.49	74.2	2.93	68.7	3.16	61.6	3.52
Residents Receiving Skilled Care	100	94.4	1.06	94.6	1.06	94.0	1.06	88.1	1.14
Residents Aged 65 and Older	100	92.3	1.08	94.7	1.06	92.0	1.09	87.8	1.14
Title 19 (Medicaid) Funded Residents	39.7	60.6	0.66	57.2	0.69	61.7	0.64	65.9	0.60
Private Pay Funded Residents	47.1	20.9	2.25	28.5	1.65	23.7	1.99	21.0	2.25
Developmentally Disabled Residents	1.5	0.8	1.83	1.3	1.16	1.1	1.33	6.5	0.23
Mentally Ill Residents	20.6	28.7	0.72	33.8	0.61	35.8	0.57	33.6	0.61
General Medical Service Residents	13.2	24.5	0.54	21.6	0.61	23.1	0.57	20.6	0.64
Impaired ADL (Mean)	42.1	49.1	0.86	48.5	0.87	49.5	0.85	49.4	0.85
Psychological Problems	52.9	54.2	0.98	57.1	0.93	58.2	0.91	57.4	0.92
Nursing Care Required (Mean)	3.9	6.8	0.57	6.7	0.58	6.9	0.56	7.3	0.53